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APPLICATION NO.	F	ILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO. 2002_0211A	CONFIRMATION NO. 9646
10/067,843		02/08/2002	Kenji Iwano		
513	7590	03/06/2006		EXAMINER	
WENDEROTH, LIND & PONACK, L.L.P.				TOMASZEWSKI, MICHAEL	
2033 K STREET N. W. SUITE 800				ART UNIT	PAPER NUMBER
	WASHINGTON, DC 20006-1021			3626	

DATE MAILED: 03/06/2006

Please find below and/or attached an Office communication concerning this application or proceeding.

DETAILED ACTION

Notice To Applicant

This communication is in response to the application filed on 08 February 2002.
 Claims 1-9 are pending. The IDS statements filed on 03 May 2002 and 08 February 2002 have been entered and considered.

Claim Rejections - 35 USC § 102

2. The following is a quotation of the appropriate paragraphs of 35 U.S.C. 102 that form the basis for the rejections under this section made in this Office action:

A person shall be entitled to a patent unless -

- (b) the invention was patented or described in a printed publication in this or a foreign country or in public use or on sale in this country, more than one year prior to the date of application for patent in the United States.
- 3. Claim 1 is rejected under 35 U.S.C. 102(b) as being anticipated by Joao (6,283,761; hereinafter Joao).
- (A) As per claim 1, Joao discloses a medical information system comprising:

Application/Control Number: 10/067,843

Art Unit: 3626

(a) a patient server that can receive vital information, retain the received vital information, and transmit the retained vital information
 (Joao: col. 12, lines 50-67; col. 13, lines 38-51; col. 14, lines 49-67; col. 15, lines 1-17; col. 23, lines 48-60; Fig. 1); and

Page 3

(b) a medical care provider server connected to the patient server through a first network, the medical care provider server being capable of retaining the vital information received from the patient server through the first network and allowing the retained vital information to be browsed (Joao: col. 12, lines 50-67; col. 13, lines 1-7 and 38-51; col. 14, lines 49-67; col. 15, lines 1-17; col. 23, lines 48-60; Fig. 1).

Claim Rejections - 35 USC § 103

- 4. The following is a quotation of 35 U.S.C. 103(a) which forms the basis for all obviousness rejections set forth in this Office action:
 - (a) A patent may not be obtained though the invention is not identically disclosed or described as set forth in section 102 of this title, if the differences between the subject matter sought to be patented and the prior art are such that the subject matter as a whole would have been obvious at the time the invention was made to a person having ordinary skill in the art to which said subject matter pertains. Patentability shall not be negatived by the manner in which the invention was made.

Art Unit: 3626

5. Claims 2-9 are rejected under 35 U.S.C. 103(a) as being unpatentable over Joao as applied to claim 1 above, and further in view of Jemes et al. (US 2001/0037384; hereinafter Jemes).

- (A) As per claim 2, Joao discloses a medical information system according to claim 1, further comprising:
 - (a) a patient terminal connected to the patient server through a network, the patient terminal being capable of transmitting the vital information to the patient server through the network (Joao: col. 12, lines 50-57; col. 13, lines 38-51; col. 14, lines 49-67; col. 15, lines 1-17; col. 23, lines 48-60; Fig. 1); and
 - (b) a doctor terminal connected to the medical care provider server through a network, the doctor terminal being capable of browsing the vital information retained in the medical care provider server through the network (Joao: col. 12, lines 57-67; col. 13, lines 1-7 and 38-51; col. 14, lines 49-67; col. 15, lines 1-17; col. 23, lines 48-60; Fig. 1).

Joao, however, fails to <u>expressly</u> disclose a medical information system according to claim 1, further comprising:

(c) second and third networks.

Art Unit: 3626

Nevertheless, these features are notoriously well known in the art, as evidenced by Jemes. In particular, Jemes discloses a medical information system according to claim 1, further comprising:

(c) second and third networks (Jemes: abstract; Fig. 1-4).

One of ordinary skill would have found it obvious at the time of the invention to combine the teachings of Jemes with the teachings of Joao with the motivation of providing a secure system for a plurality of interconnected networks (Jemes: abstract).

- (B) As per claim 3, Joao discloses a medical information system according to claim 2, further comprising a sensor for measuring vital data, wherein the vital information includes a measurement value by the sensor (Joao: col. 23, lines 47-61).
- (C) As per claim 4, Joao discloses a medical information system according to claim 2, wherein:
 - the doctor terminal can transmit an inquiry regarding health status of a patient to the medical care provider server through the network (Joao: col. 31, lines 65-67; col. 32, lines 1-47; Fig. 1);

Art Unit: 3626

the medical care provider server can transmit the inquiry received from the doctor terminal to the patient server through the first network (Joao: col. 31, lines 65-67; col. 32, lines 1-47; Fig. 1);

- (c) the patient server can transmit the inquiry received from the medical care provider server to the patient terminal through the network (Joao: col. 31, lines 65-67; col. 32, lines 1-47; Fig. 1); and
- (d) the vital information transmitted from the patient terminal to the patient server through the network includes a reply to the inquiry transmitted to the patient terminal (Joao: col. 31, lines 65-67; col. 32, lines 1-47; Fig. 1).

Joao, however, fails to <u>expressly</u> disclose a medical information system according to claim 2, wherein:

(e) the system comprises second and third networks.

Nevertheless, these features are notoriously well known in the art, as evidenced by Jemes. In particular, Jemes discloses a medical information system according to claim 2, wherein:

(e) the system comprises second and third networks (Jemes: abstract; Fig. 1-4).

Art Unit: 3626

One of ordinary skill would have found it obvious at the time of the invention to combine the teachings of Jemes with the teachings of Joao with the motivation of providing a secure system for a plurality of interconnected networks (Jemes: abstract).

- (D) As per claim 5, Joao fails to <u>expressly</u> disclose a medical information system according to claim 2, further comprising:
 - (a) a first unauthorized access prevention section provided in the first network;
 - (b) a second unauthorized access prevention section provided in the second network;
 - (c) a third unauthorized access prevention section provided in the third network; and
 - (d) wherein the first and third unauthorized access prevention sections have higher security levels than that of the second unauthorized access prevention section.

Nevertheless, these features are old and well known in the art, as evidenced by Jemes. In particular, Jemes discloses a medical information system according to claim 2, further comprising:

Art Unit: 3626

- (a) a first unauthorized access prevention section provided in the first network (Jemes: abstract; par. [0007] [0017]; par. [0033] [0047]; Fig. 1-4);
- (b) a second unauthorized access prevention section provided in the second network (Jemes: abstract; par. [0007] [0017]; par. [0033] [0047]; Fig. 1-4);
- (c) a third unauthorized access prevention section provided in the third
 network (Jemes: abstract; par. [0007] [0017]; par. [0033] [0047]; Fig.
 1-4); and
- (d) wherein the first and third unauthorized access prevention sections have higher security levels than that of the second unauthorized access prevention section (Jemes: abstract; par. [0007] – [0017]; par. [0033] – [0047]; Fig. 1-4).

One of ordinary skill would have found it obvious at the time of the invention to combine the teachings of Jemes with the teachings of Joao with the motivation of providing a secure system for a plurality of interconnected networks (Jemes: abstract).

Examiner notes also that Joao teaches the use of various authorization, security and encryption techniques, technologies, and methods (Joao: col. 15, lines 54-58; col. 40, lines 51-60).

Art Unit: 3626

(E) As per claim 6, Joao fails to <u>expressly</u> disclose a medical information system according to claim 5, wherein:

- (a) the first unauthorized access prevention section is provided with a firewall and a virtual private network;
- (b) the second unauthorized access prevention section is provided with a remote access server; and
- (c) the third unauthorized access prevention section is provided with a terminal authentication server.

Nevertheless, these features are old and well known in the art, as evidenced by Jemes. In particular, Jemes discloses a medical information system according to claim 5, wherein:

- the first unauthorized access prevention section is provided with a firewall and a virtual private network (Jemes: abstract; par. [0007] [0017]; par. [0033] [0047]; Fig. 1-4);
- (b) the second unauthorized access prevention section is provided with a remote access server (Jemes: abstract; par. [0007] – [0017]; par. [0033] – [0047]; Fig. 1-4); and

Art Unit: 3626

(c) the third unauthorized access prevention section is provided with a terminal authentication server (Jemes: abstract; par. [0007] – [0017]; par. [0033] – [0047]; Fig. 1-4).

One of ordinary skill would have found it obvious at the time of the invention to combine the teachings of Jemes with the teachings of Joao with the motivation of providing a secure system for a plurality of interconnected networks (Jemes: abstract).

Examiner notes also that Joao teaches the use of various authorization, security and encryption techniques, technologies, and methods (Joao: col. 15, lines 54-58; col. 40, lines 51-60).

- (F) As per claim 7, Joao discloses a medical information system according to claim 2, wherein the patient server and the medical care provider server are respectively clustered (Joao: abstract; col. 3, lines 33-53; Fig. 1).
- (G) As per claim 8, Joao discloses a medical information system comprising:
 - (a) a plurality of patient servers that can receive vital information, retain the received vital information, and transmit the retained vital information
 (Joao: col. 12, lines 50-67; col. 13, lines 38-51; col. 14, lines 49-67; col. 15, lines 1-17; col. 23, lines 48-60; Fig. 1);

Art Unit: 3626

(b) a medical care provider server connected to the patient servers through a first network, the medical care provider server being capable of retaining the vital information received from the patient servers through the first network and allowing the retained vital information to be browsed (Joao: col. 12, lines 50-67; col. 13, lines 38-51; col. 14, lines 49-67; col. 15, lines 1-17; col. 23, lines 48-60; Fig. 1);

- (c) a plurality of patient terminals respectively connected to the patient server through a network, the patient terminals being capable of transmitting the vital information to the patient server through the network (Joao: col. 12, lines 50-67; col. 13, lines 38-51; col. 14, lines 49-67; col. 15, lines 1-17; col. 23, lines 48-60; Fig. 1); and
- (d) a doctor terminal connected to the medical care provider server through a network, the doctor terminal being capable of browsing the vital information retained in the medical care provider server through the network (Joao: col. 12, lines 50-67; col. 13, lines 38-51; col. 14, lines 49-67; col. 15, lines 1-17; col. 23, lines 48-60; Fig. 1).

Joao, however, fails to <u>expressly</u> disclose a medical information system comprising:

(e) second and third networks.

Art Unit: 3626

Nevertheless, these features are notoriously well known in the art, as evidenced by Jemes. In particular, Jemes discloses a medical information system comprising:

(e) second and third networks (Jemes: abstract; Fig. 1-4).

One of ordinary skill would have found it obvious at the time of the invention to combine the teachings of Jemes with the teachings of Joao with the motivation of providing a secure system for a plurality of interconnected networks (Jemes: abstract).

- (H) As per claim 9, Joao discloses a medical information system comprising:
 - (a) a patient server that can receive vital information, retain the received vital information, and transmit the retained vital information (Joao: col. 12, lines 50-67; col. 13, lines 38-51; col. 14, lines 49-67; col. 15, lines 1-17; col. 23, lines 48-60; Fig. 1);
 - (b) a plurality of medical care provider servers respectively connected to the patient server through a first network, the medical care provider servers through the first network and allowing the retained vital information to be browsed (Joao: col. 12, lines 50-67; col. 13, lines 38-51; col. 14, lines 49-67; col. 15, lines 1-17; col. 23, lines 48-60; Fig. 1);
 - (c) a patient terminal connected to the patient server through a network, the patient terminal being capable of transmitting the vital information to the

patient server through the network (Joao: col. 12, lines 50-67; col. 13, lines 38-51; col. 14, lines 49-67; col. 15, lines 1-17; col. 23, lines 48-60; Fig. 1); and

(d) a plurality of doctor terminals respectively connected to the medical care provider serves through a network, the doctor terminals being capable of browsing the vital information retained in the medical care provider servers through the network (Joao: col. 12, lines 50-67; col. 13, lines 38-51; col. 14, lines 49-67; col. 15, lines 1-17; col. 23, lines 48-60; Fig. 1).

Joao, however, fails to <u>expressly</u> disclose a medical information system comprising:

(e) second and third networks.

Nevertheless, these features are notoriously well known in the art, as evidenced by Jemes. In particular, Jemes discloses a medical information system comprising:

(e) second and third networks (Jemes: abstract; Fig. 1-4).

One of ordinary skill would have found it obvious at the time of the invention to combine the teachings of Jemes with the teachings of Joao with the motivation of providing a secure system for a plurality of interconnected networks (Jemes: abstract).

Art Unit: 3626

Conclusion

6. The prior art made of record and not relied upon is considered pertinent to Applicant's disclosure. The cited but not applied art teaches a modular microprocessor-based health monitoring system (5,307,263); a patient care and communication system (5,822,544); a secure network and method of establishing communication amongst network devices that have restricted network connectivity (US 2002/0066030); supporting load sharing across multiple network access servers (6,147,987); and supporting authentication across multiple network access servers (6,011,910).

The cited but not applied prior art also includes non-patent literature articles by PR Newswire ("Euclid to Monitor Health Hero Network's Internet Operations" Jan 14, 2002. pg. 1.); Business Wire ("Spacelabs Medical, Inc. Reports First Quarter Results" Apr 27, 1999. pg. 1.); Sutton, Neil ("Hospital offers patients Internet-based access" Aug 2001. Technology in Government. Vol. 8, Iss. 8. pg. 7.); M2 Presswire ("ASG: ASG Technologies debuts in US market; Improves service providers' networks with first network access control & security solution; Passwerks 2.0 provides increased network efficiency, access control and security" Jun 6, 2001. pg. 1.); Russell, Deborah and Gangemi Sr., G.T. ("Computer Security Basics" Copyright 1991. O'Reilly & Associates, Inc.); and Al-Kaltham, Abdul-Rahman Ibrahim ("Evaluation and Comparison of Internet Firewalls. Feb 9, 1998.).

Application/Control Number: 10/067,843

Art Unit: 3626

7. Any inquiry concerning this communication or earlier communications from the examiner should be directed to Mike Tomaszewski whose telephone number is (571)272-8117. The examiner can normally be reached on M-F 7:00 am - 3:30 pm.

Page 15

If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Joseph Thomas can be reached on (571)272-6776. The fax phone number for the organization where this application or proceeding is assigned is 571-273-8300.

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MT 12.09.2005

SUPERVISORY PATENT EXAMINER